

MAY 29 2003

K031286

**510(k) SUMMARY OF SAFETY AND EFFECTIVENESS**  
in Accordance with SMDA of 1990**SAFIL AND SAFIL QUICK SYNTHETIC ABSORBABLE SURGICAL SUTURE**

April 22, 2003

**COMPANY:** Aesculap®, Inc.  
3773 Corporate Parkway  
Center Valley, PA 18034

**CONTACT:** Georg Keller, Manager Regulatory Affairs  
800-258-1946 (phone)  
610-791-6882 (fax)  
georg.keller@aesculap.com (email)

**TRADE NAME:** Safil and Safil Quick Synthetic Absorbable Surgical Suture

**COMMON NAME:** Synthetic Absorbable Poly (Glycolide/L-lactide) Surgical Suture

**DEVICE CLASS:** Class II

**PRODUCT CODE:** GAM

**CLASSIFICATION:** 878.4493, Synthetic Absorbable Poly (Glycolide/L-lactide) Surgical Suture

**REVIEW PANEL:** General & Plastic Surgery

**INTENDED USE**

Safil and Safil Quick sutures are indicated for use in general soft tissue approximation, including ophthalmic procedures, but not in cardiovascular or neurological procedures.

**DEVICE DESCRIPTION**

The subject device is an absorbable, flexible multifilament suture thread which is supplied sterile. It is composed of a synthetic polyglycolic acid polymer and it is indicated for soft tissue approximation where only short term wound support is required. It will be offered dyed or undyed with the FDA approved colorant D&C Violet No.2 or D&C Green No.6 in accordance with Title 21 CFR, §74.3206. The modified device is coated with an absorbable polyclyconate.

**PERFORMANCE DATA**

No performance standards have been promulgated under Section 514 of the Food, Drug and Cosmetic Act for these devices.

**SUBSTANTIAL EQUIVALENCE**

Aesculap believes that the Safil and Safil Quick Absorbable Surgical Suture is substantially equivalent to Safil Synthetic Absorbable Surgical Suture (K011372), Safil Quick Synthetic Absorbable Surgical Suture (K980704) and the following other predicate devices:

- Vicryl Synthetic Absorbable Surgical Suture (K944110 and K962480)
- MonoSyn Synthetic Absorbable Surgical Suture (K011375)



MAY 29 2003

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

Mr. Georg Keller  
Manager Regulatory Affairs  
Aesculap<sup>®</sup>, Inc.  
3773 Corporate Parkway  
Center Valley, Pennsylvania 18034

Re: K031286

Trade/Device Name: Safil and Safil Quick Synthetic Absorbable Surgical Suture  
Regulation Number: 21 CFR 878.4493  
Regulation Name: Absorbable poly(glycolide/L-lactide) surgical suture  
Regulatory Class: II  
Product Code: GAM  
Dated: April 22, 2003  
Received: May 6, 2003

Dear Mr. Keller:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97) you may obtain. Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,

*Miriam C. Provost*  
for Celia M. Witten, Ph.D., M.D.  
Director  
Division of General, Restorative  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

**INDICATIONS FOR USE STATEMENT**510(k) Number (if known): K031286**Device Name: Safil and Safil Quick Synthetic Absorbable Surgical Sutures****Indication for Use:**

Safil and Safil Quick sutures are indicated for use in general soft tissue approximation, including ophthalmic procedures, but not in cardiovascular or neurological procedures.

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(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use X or Over-the-Counter Use \_\_\_\_\_  
(per 21 CFR 801.109)

(Optional Format 3-10-98)

Miriam C. Provost  
(Division Sign-Off)  
Division of General, Restorative  
and Neurological Devices

510(k) Number K031286